6

# Memorandum

October 1, 1991

District Administrators

Via: Mary Louise Gutierrez-Mock Assistant Deputy Director

> Licensing and Certification 1800 Third Street, Suite 210 P.O. Box 942732 Sacramento, CA 95234-7320 (916) 445-2070 or ATSS 8/485-2070

PTB 91-42

Subject :

Amendments to Draft Intermediate Care Facility/Developmentally Disabled-Nursing (ICF/DD-N) Regulations

[]	Statute Change ####################################	[] Federal Change State Agency Letter #	
	Effective Date	State Operations Menual # Regulation # Program Hemo, Transmittal #	
(1	State Regulation Change	[] Court Decision DG NG Initiated [] Field Requested	

#### BACKGROUND

The current Title 22 requirement for staffing in the Intermediate Care Facility/Developmentally Disabled-Nursing (ICF/DD-N) (draft) regulations requires that nonlicensed direct care staff shall be certified nurse assistants (CNAs) or persons enrolled in a precertification program within three months of employment. Because of the statutes limiting the types of nursing procedures that CNAs may perform, staff from Department of Developmental Services (DDS) and Licensing and Certification (L&C) determined that a different type of training for unlicensed staff would be more effective and more useful for the types of clients being served. Thus, a "DD attendant training program" was developed. The legal basis for an "attendant" is an exemption in the Nurse Practice Act for attendants who work in facilities visited by Department of Health Services staff and which are monitored by DDS staff (Section 2728, Business & Professions Code).

District Administrators Page 2 October 1, 1991

The regulation describing the training program has been incorporated into the subsequent drafts of the ICF/DD-N regulations and specifies that the training program, whether conducted by the licensee, an agency, or public instruction, must be approved by DDS.

Additionally, in support of the above amendment, Section 73874 has been amended, and a new Section, 73874.1 added. Please note that these two sections describe the "Attendant Training Program" In particular, these regulations authorize requirements. attendant staff to perform certain procedures for individual clients after having been specifically trained and certified to do so by a registered nurse and after demonstrating proficiency. Evidence of the attendant's competency is required to be in The regulation's training requirements prohibit writing. attendants from doing the following: inserting or removing nasogastric and gastrostomy tubes, tracheostomy appliances, indwelling catheters and any intravenous apparatus. Nasogastric and gastrostomy tube feedings may be performed by attendants if the requirements of these regulations are met.

Other regulatory changes will follow but will not be issued untithe entire regulatory package is complete.

DDS informed all DD-N providers of the new requirements through its annual program review and approval process. DDS currently enforces these requirements. This memorandum serves to notify Licensing of the new requirements which are to be implemented upon receipt. To provide further clarification, existing and amended Sections 73873(f) and 73874 and draft Section 73874.1 of the ICF/DD-N regulations in strikeout/underline format are attached.

#### POLICY

It is the policy of L&C to apply the amended draft requirements regarding ICF/DD-N staff.

### PROCEDURE

When licensing ICFs/DD-N, the attached amended and added regulations are to be used instead of requirements of Sections 73873(f) and 73874 existing in current draft regulations. Under the amended draft regulation, CNAs are no longer included as nonlicensed direct care staff in this program, but have been replaced by attendants or persons enrolled in an attendant training program.

District Administrators
Page 3

October 1, 1991

•

### POLICY AND PROCEDURE MANUAL CHANGE/UPDATE

This memorandum will make changes/updates to the policy and procedure manual: [] Yes [X] No

#### TRAINING

District Administrators must ensure that all appropriate office staff receive timely in-service regarding the provisions of this memo. The preceptors will maintain all in-service/training files in the District Office.

Should you have any questions, please contact Jerry Simkins, Chief, Community Based Programs Unit at (916) 327-4299 or ATSS 8/467-4299.

Teresa Hawkes

Acting Deputy Director

Attachments

Attachments

į.

# Existing Section 73873(f):

1

Nonlicensed-direct-care-staff-shall-be-certified-nurse-assistants pursuant-to-Section-1377-et-seqr-of-the-Health-end-Safety--Code or-persons-enrolled-in-a-precertification-program-approved-by-the Bepartment-and--conducted-by-another-health-facility;-agency-or public-educational-institution:-Such-training-shall-commence within-three-(3)-months-of-employment-and-be-completed-no-later than-six-(6)-months-from-the-date-of-employment-

## Amended Section 73873(f):

Direct-care staff, who are not licensed professionals, shall be attendants pursuant to Section 2728, Business and Professions Code, or persons enrolled in an attendant training program approved by the Department of Developmental Services. Such training shall commence within three (3) months of employment and be completed no later than six (6) months from the date of employment.

# § 73874. Program Services—Orientation and In-Service Education.

- (a) A person who is, or is eligible to be, a qualified mental retardation professional, a registered nurse, licensed vocational nurse or licensed psychiatric tennician shall be designated responsibility for coordinating staff development and education.
- b) All new staff shall be provided sixteen (16) hours of orientation by a qualified mental retardation professional, a registered nurse, licensed vocational nurse or licensed psychiatric technician. These hours shall be completed and be documented during the first forty (40) hours of employment.
- (1) Prior to providing direct client care and during the first eight (8) hours of employment each direct—care staff member shall be provided with the following.
  - (A) A tour of the facility.
  - (B) A description of the client population.
  - (C) The clients' daily schedule.
- (D) Instruction in the use and application of equipment and assistive devices.
- (E) Instruction in unusual occurrences and life saving procedures including, but not limited to, emergency procedures for relief of choking.
  - (F) Orientation to fire and disaster plans.
- (G) An introduction to client care and special needs of developmentally disabled persons.
- (2) The remaining eight (8) hours of orientation small include, but not be limited to:
  - (A) Administrative structure of the facility.
  - 1. Organization of staff.
  - 2. Services offered.
  - 3. The role of direct—care staff, including job descriptions, the telept, attitudes and approaches to clients.
  - 4. Personnei policies.
  - (B) The facility's philosophy of stient care.
- Overall concepts of the facility's program to meet the needs of the clients, including normalization and interdisciplinar professional start/team concept.
  - (D) Developmental growth and assessment
  - (E) Clients' activities of daily living
  - (F) Implementation of the individual service plan
  - (G) Client's rights.
  - (H) Nursing policies and procedures.
  - (I) Legal and ethical considerations of health care.
- (I) The rate of federal and state regulations in the provision of care by
- (c) The facility shall require that all chrect-care staff receive at least two (2) hours per month, twenty-four 24) hours annually, of planned inservice education which shall be documented and shall include, but not be limited to, the following topics:
  - (1) Program techniques specific to the facility's clients.
  - Deventurg program phjectives for clients.
  - (3) Evaluation and assessment techniques.
- 14) Documentation of a client's response to his her program including posservation, reporting, and recording.
  - (5) Spec.\_ developmental needs of the facility's clients.
  - 16) Sensity deprivation and stimulation.
- (7) Interressonal relationship and communication skills between staff and client:
- 181 Payan social aspects of developmental disabilities as related to the andividua. This and community.
  - \*Con: : musicy of client information.
- JI De. . upn of signs of illness or dysfunction that warrant medical or nursing revenuon.

- (1) Maintenance of healthy skin: prevention of skin breakdown, body positioning and range of motion.
  - :12) Basic nursing and heaith related skills.
  - (13) Bladder and bowel training and management.
  - 1141 Oral hygiene.
  - · 15. Nutritional needs of clients including special feeding techniques.
  - · 16: Behavior management.
    - . Emergency intervention procedures for behavior control.
  - :3: Prevenuon and control of infection.
  - 19) Fire and accident prevention and safety.
  - -20) Disaster preparedness.
- •21: Clients' rights as specified in Welfare and Institutions Code, Sections +502 through 4507, and Title 17. California Code of Regulations, Sections 50500 through 50550.
- The role and involvement of the paroit, guardian, conservator or authorized representative, in the overall olient service plan.
- (23) Instruction in first aid and cardiopulmonary resuscitation to be taught by an instructor certified by the American Red Cross or the American Heart Association.
- (24) If any client has epilepsy, the causes and treatment of epilepsy, care during and fell wing an epilepsic seizure, safety precautions, and protective equipment
  - (25) Locating and using program reference materials.
  - (25) The use and proper application of postural supports.
  - (7) Caring for the dying client and understanding the grieving pro-
- (d) In abilition to twenty-four (24) hours of in-service training the facility shall provide a ten (10) hour program in medication administration pursuant to Section 73877 (f), either through a college system or through the facility medication training program, taught by the facility registered hurse and/or consultant pharmacist.
  - If The medication training program shall include, but not be limited the following:
  - (A) Use, action and side effects of drugs used in the facility.
- (B) General practices, procedures and techniques for administering oral, rectal, eye, ear, nose and topical medications.
  - (C) Prescriber's verbal orders.
  - (D) Automatic stop orders.
  - (E) Medication storage and labeling.
  - ·F· Disposition of unused and outdated medications.
- (G) Requirements for documentation of the administration of medications and treatments.
- (H) Requirements for documentation and physician notification of medication errors.
  - (I) Metric and apothecary dosages.
  - (J) Commonly used abbreviations.
  - (K) Locating and using reference materials.
- (2) Successful completion of a coilege based or facility medication training program shall be documented in the employee's training record.
- •31 Prior to unsupervised administration of medication by non-licensed direct—care staff, and annually thereafter, the facility registered nurse shall observe and certify the staff person's proficiency in handling, administering and recording of drugs given and shall document the proficiency in the staff person's training record.
- e: A Certified Nurse Assistant (CNA) may perform specific health maintenance procedures for clients, support to the following:
- It The health maintenance procedure shall be specifically ordered by the attending physician.
- ·21 The CNA shall be trained by the facility registered nurse (RN) to perform the procedures and shall demonstrate proficiency in performing the procedure while under the immediate supervision of the RN.
- (3) A signed written statement snall be prepared by the RN which includes a certification of the CNA's competence to perform the procedure and which identifies for whom the procedure is applicable. This tertifica-

Page 928

#### Title 22

uon shall be placed and maintained in the CA's training record and in the unit client record.

(4) The certification is proceedupe and client sports, and shall not be transferred between clients optacilities

(5) The RN shall be responsible for ongoing monitoring and staff implementation of the procedure. At least annually, the RN shall observe and confirm the Constraint in performing the approved procedure and shall update the confirmation.

(6) Training protocols to each of the procedures CNAs may perform shall be revie ed and epproved as part of the facility program plan pursuant of Section 4859(a)(14).

(f) Documentation of each planned in-service education session shall be main ened, including the name and title of the presenter, date of presentation, title of subject covered including description and content, duration of the program and the legible signatures of those in attendance.

Note: Authority enec: Sections 208(a) and 1275.3. Health and Safety Code. Reference: Sections 1275.3 and 1276. Health and Safety Code; and Sections 4502-4507, Welfare and Insummons Code.